

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Titus for Congress

ADDRESS (number and street)

PO Box 72454

Check if different  
than previously  
reported. (ACC)

Las Vegas

NV

89170

2. FEC IDENTIFICATION NUMBER ▼

C

C00499467

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NV

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

11

D D / Y Y Y Y

25

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dina Titus

Signature of Treasurer

Dina Titus

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

31

Y Y Y Y

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 18

Write or Type Committee Name

Titus for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	590.00	860.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	590.00	860.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	22255.40	45071.15
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	22255.40	45071.15
8. Cash on Hand at Close of Reporting Period (from Line 27).....	128448.50	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	5000.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 18

Write or Type Committee Name

Titus for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

350.00

600.00

(ii) Unitemized.....

240.00

260.00

(iii) TOTAL of contributions from individuals ▶

590.00

860.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

590.00

860.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

590.00

860.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 18

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	22255.40	45071.15
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	1000.00	1000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	23255.40	46071.15

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	151113.90
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	590.00
25. SUBTOTAL (add Line 23 and Line 24).....	151703.90
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	23255.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	128448.50

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Titus for Congress**

Full Name (Last, First, Middle Initial) <b>Easy Home Nevada</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014
Mailing Address 4463 W Charleston Blvd		Transaction ID : VNW7MDHT4M8
City Las Vegas	State NV	Zip Code 89102-1617
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	LLC - Members below if itemized. Permissible funds.

Full Name (Last, First, Middle Initial) <b>Wayne Kartin</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014
Mailing Address 11700 El Cerro Ln		Transaction ID : VNW7MDHSV92
City Studio City	State CA	Zip Code 91604-4109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer easyn Nevada, LLC	Occupation Management	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>Wayne Kartin</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2014
Mailing Address 11700 El Cerro Ln		Transaction ID : VNW7MDDWT13
City Studio City	State CA	Zip Code 91604-4109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer easyn Nevada, LLC	Occupation Management	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	350.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address 7085 W Ann Rd

City	State	Zip Code
Las Vegas	NV	89130-3866

Purpose of Disbursement  
Cell Phone Service

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2014

Amount of Each Disbursement this Period

184.93
--------

Transaction ID : VNV8C9R4PG7

**B. First Data Merchant Services**Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City	State	Zip Code
Atlanta	GA	30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

0.10
------

Transaction ID : VNV8C9R0JX8

**C. First Data Merchant Services**Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City	State	Zip Code
Atlanta	GA	30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

0.97
------

Transaction ID : VNV8C9R0JY6

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

186.00

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

## **A. First Data Merchant Services**

Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 03 / 2014

Amount of Each Disbursement this Period

9.95

Transaction ID : VNV8C9R0JZ4

## **B. First Data Merchant Services**

Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 03 / 2014

Amount of Each Disbursement this Period

19.95

Transaction ID : VNV8C9R0K02

## **C. First Data Merchant Services**

Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 03 / 2014

Amount of Each Disbursement this Period

19.95

Transaction ID : VNV8C9R0K19

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

49.85

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Merchant Services**Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

25.93
-------

Transaction ID : VNV8C9R0K27

**B. First Data Merchant Services**Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

43.85
-------

Transaction ID : VNV8C9R0K35

**C. First Data Merchant Services**Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

66.61
-------

Transaction ID : VNV8C9R0K43

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

136.39



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Merchant Services**Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

528.32
--------

Transaction ID : VNV8C9R0K51

**B. Kalik & Associates, Inc.**

Mailing Address 10291 Arizona Cir

City Bethesda State MD Zip Code 20817-1227

Purpose of Disbursement  
Consultant - Fundraising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

4079.74
---------

Transaction ID : VNV8C9R4P91

**C. Next Level Partners**Mailing Address 410 1st St SE  
Ste 310

City Washington State DC Zip Code 20003-1819

Purpose of Disbursement  
Consultant - Compliance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : VNV8C9R0K93

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6358.06

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. Paychex**Mailing Address 2340 Corporate Cir  
Ste 175

City Henderson State NV Zip Code 89074-7736

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

5800.54
---------

Transaction ID : VNV8C9R0K69

**B. Francisco Morales**

Mailing Address 1618 Eastwood Dr

City Las Vegas State NV Zip Code 89104-3951

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

1711.69
---------

Transaction ID : VNV8C9R6W31

[MEMO ITEM]

\*

**c. Scot D Rutledge**

Mailing Address 34 Diamond Cir

City Las Vegas State NV Zip Code 89106-3711

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

4088.85
---------

Transaction ID : VNV8C9R6W49

[MEMO ITEM]

\*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5800.54
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. Paychex**Mailing Address 2340 Corporate Cir  
Ste 175

City Henderson State NV Zip Code 89074-7736

Purpose of Disbursement  
Payroll - Invoice

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

73.95
-------

Transaction ID : VNV8C9R0K77

**B. Paychex**Mailing Address 2340 Corporate Cir  
Ste 175

City Henderson State NV Zip Code 89074-7736

Purpose of Disbursement  
Payroll - Taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

1812.76
---------

Transaction ID : VNV8C9R0K85

**C. Paychex**Mailing Address 2340 Corporate Cir  
Ste 175

City Henderson State NV Zip Code 89074-7736

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2014

Amount of Each Disbursement this Period

4099.27
---------

Transaction ID : VNV8C9R4PJ3

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5985.98

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. Scot D Rutledge**

Mailing Address 34 Diamond Cir

City	State	Zip Code
Las Vegas	NV	89106-3711

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2014

Amount of Each Disbursement this Period

4099.27
---------

Transaction ID : VNV8C9R6W65

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. PDQ Printing of Las Vegas, Inc.**

Mailing Address 3820 S Valley View Blvd

City	State	Zip Code
Las Vegas	NV	89103-2904

Purpose of Disbursement  
Printing of Campaign Materials

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2014

Amount of Each Disbursement this Period

524.92
--------

Transaction ID : VNV8C9R98X7

Full Name (Last, First, Middle Initial)

**C. Proof Interactive, Inc.**

Mailing Address 3136 E Russell Rd

City	State	Zip Code
Las Vegas	NV	89120-3463

Purpose of Disbursement  
Website

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2014

Amount of Each Disbursement this Period

165.00
--------

Transaction ID : VNV8C9R4NX7

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

689.92

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. Proof Interactive, Inc.**

Mailing Address 3136 E Russell Rd

City	State	Zip Code
Las Vegas	NV	89120-3463

Purpose of Disbursement  
Website

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2014

Amount of Each Disbursement this Period

838.89
--------

Transaction ID : VNV8C9R4NY5

**B. Scot D Rutledge**

Mailing Address 34 Diamond Cir

City	State	Zip Code
Las Vegas	NV	89106-3711

Purpose of Disbursement  
Reimbursement (Vendors that aggregate over \$200 listed Below)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2014

Amount of Each Disbursement this Period

1313.23
---------

Transaction ID : VNV8C9R4PF9

**C. Southwest Airlines**

Mailing Address PO Box 36647

City	State	Zip Code
Dallas	TX	75235-1647

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2014

Amount of Each Disbursement this Period

68.75
-------

Transaction ID : VNV8C9R6X42

[MEMO ITEM]

\*

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2152.12

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. St. John Baptist Greek Orthodox Church**

Mailing Address 5300 El Camino Rd

City	State	Zip Code
Las Vegas	NV	89118-1922

Purpose of Disbursement  
Holiday Cookies

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 18 / 2014

Amount of Each Disbursement this Period

620.00
--------

Transaction ID : VNV8C9R6WW9

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. The United States Postal Service**

Mailing Address 1001 E Sunset Rd

City	State	Zip Code
Las Vegas	NV	89199-5104

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 18 / 2014

Amount of Each Disbursement this Period

48.00
-------

Transaction ID : VNV8C9R6X18

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**c. The United States Postal Service**

Mailing Address 1001 E Sunset Rd

City	State	Zip Code
Las Vegas	NV	89199-5104

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 18 / 2014

Amount of Each Disbursement this Period

19.60
-------

Transaction ID : VNV8C9R6X26

[MEMO ITEM]

\*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. Storage West Self Storage**

Mailing Address 7485 S. Sunset Rd.

City	State	Zip Code
Las Vegas	NV	89121

Purpose of Disbursement  
Storage Unit Rental

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2014

Amount of Each Disbursement this Period

149.90
--------

Transaction ID : VNV8C9R4PC5

**B. Dina Titus**

Mailing Address PO Box 50614

City	State	Zip Code
Henderson	NV	89016-0614

Purpose of Disbursement  
Reimbursement (Vendors that aggregate over \$200 listed Below)

Candidate Name

Dina Titus

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

248.45
--------

Transaction ID : VNV8C9R4PB7

**c. U.S. House of Representatives Gift Shop**Mailing Address Longworth House Office Building  
Independence Avenue and South Capi

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Gifts

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

248.45
--------

Transaction ID : VNV8C9R6WN3

[MEMO ITEM]

\*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

398.35

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Titus for Congress

Full Name (Last, First, Middle Initial)

**A. Whole Foods**

Mailing Address 2323 Wisconsin Ave NW

City	State	Zip Code
Washington	DC	20007-1844

Purpose of Disbursement  
Food for Event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2014

Amount of Each Disbursement this Period

212.79
--------

Transaction ID : VNV8C9R1TJ8

**B.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

212.79

21970.00





**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 18 OF 18

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Titus for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Anzalone Liszt Research, Inc.**

Nature of Debt (Purpose):

Win Bonus

Mailing Address 260 Commerce St  
FI 4City State Zip Code  
Montgomery AL 36104-2546

Outstanding Balance Beginning This Period

5000.00

Transaction ID : VNS9W9H6Q29

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

5000.00

2) **TOTALS** This Period (last page this line number only) .....

5000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

5000.00